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Richard		(Depositor's name)	
		/	(Signature)
August 5,	2005		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/699.145	10/27/2000	John D. Kaewell IR	1-2-116 1115	6267

TITLE OF INVENTION: CODE DIVISION MULTIPLE ACCESS MODEM INTERFACE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$0	\$1	\$1400 08/08/2		
EXAM	MINER	ART UNIT		CLASS-SUBCLASS	7			
LEE, CHRI	STOPHER E	2112	-	710-305000				
CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-07. Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i	tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B as an assignee is identified be a 37 CFR 3.11. Completion of	Correspondence tion form of a Customer E PRINTED ON THE P low, no assignee data of this form is NOT a su (B) RES	the names of agents OR, alto agents OR, alto the name of agistered attorn ergistered pate ted, no name vertically appear on bottitute for filistically in the second of the name of the second of the name of the	a single firm (having as ey or agent) and the nan at attorneys or agents. I will be printed.	a member a mes of up to f no name is	23	and Koenig,	
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a. Applicant claims S	(from status indicated above MALL ENTITY status. See 3 is requested to apply the Issu ublication Fee (if required) words of the United States Pate	7 CFR 1.27. 🚨 b.	. Applicant is 1	no longer claiming SMA	ALL ENTITY s			090435 (

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Richard L. Cruz

Authorized Signature

Typed or printed name

Date August 5, 2005

Registration No. 52,783

Approved for use through 07/31/2006.

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Effec		Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005				Application Nun	nber	09/699,145			
				Filing Date		October 27, 20	00		
				First Named Inv	entor	Kaewell et al.			
Applicant claims smal	Logdity status	Soc 27 CER 1 27		Examiner Name		Christopher E. Lee			
			[Art Unit		2112			
TOTAL AMOUNT OF PAY	MENT (\$)	1,412.00		Attorney Docket	No.	I-2-0116.1US			
METHOD OF PAYMEN	METHOD OF PAYMENT (check all that apply)								
Check Credit		Money Order] _{None} 0435				nmunications Corporation		
For the above-ident	ified deposit	account, the Director	is herel						
Charge fee(s) indicated be	elow		Charg	e fee(s)	indicated below. ex	cept for the filing fee		
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FEE CALCULATION	•								
1. BASIC FILING, SEAF	FILING I	FEES S	SEARC	H FEES	EXAM	INATION FEES			
Application Type	Fee (\$)	mall Entity Fee (\$)	ee (\$)	Small Entity Fee (\$)	Fee	Small Entity (\$) Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
Fee Description Each claim over 20 or, for Each independent claim Multiple dependent claim	2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Small Entity Fee (\$) Fee (\$) 100 180								
HP = highest number of total Indep. Claims - = HP = highest number of indep	Extra Claims	<u>Fee (\$)</u> x=	Fee Pa 0.00	<u>uid (\$)</u>		0.00	Paid (\$)		
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets 100 = /50 = (round up to a whole number) x = 0.00									
Other: Issue Fee, 4	A. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: Issue Fee, 4 Advanced Soft Copies 1,412.00								
SUBMITTED BY									

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Signature	100	Registration No. (Attorney/Agent)	Telephone 215-568-6400
Name (Print/Type)	Richard L. Cruz		Date August 5, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/21 (09-04) Approved for use through 07/31/2006.
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/699.145 Filing Date TRANSMITTAL October 27, 2000 First Named Inventor **FORM** Kaewell et al. Art Unit 2112 **Examiner Name** Christopher E. Lee (to be used for all correspondence after initial filing) Attorney Docket Number I-2-0116.1US Total Number of Pages in This Submission

	ENCLOSURES (Check all that apply)								
×	Fee Tran	smittal Form		Drawin	ng(s)			After Allowance Communication to TC Appeal Communication to Board	
	X F	ee Attached		Licens	ing-related Papers			of Appeals and Interferences	
		ent/Reply fter Final		Petition Petition to Convert to a			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information		
	$\overline{\Box}$	ffidavits/declaration(s)		Power Chang	onal Application of Attorney, Revoca e of Correspondence			Status Letter Other Enclosure(s) (please Identify	
		n of Time Request	Terminal Disclaimer Request for Refund				PTC	below):)L-85 Form	
Express Abandonment Request Information Disclosure Statement			CD, Number of CD(s)			_			
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Ren	narks			I	<u> </u>	
		SIGNA	TURE	OF AF	PPLICANT, ATT	ORNEY, C	RAG	ENT	
Firm N	VOLPE AND KOENIG, P.C.								
Signat	Signature								
Printed	d name	Richard L. Cruz							
Date		August 5, 2005				Reg. No.	52,78	33	

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